SEP 0 8 2010 #

9-9-10

IF RCE/

Application No. (if known): 10/578,383

Attorney Docket No.: 65512(70801)

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RCE Transmittal (1 page) Fee Transmittal (1 page)

Amendment Accompanying RCE (12 pages)

Copy of Amendment After Final Rejection, as filed on 8/5/10 (14 pages)

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Effective on 12/08/2004, Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known						
				Application Nun	nber	10/578,383 conf.# 1914				
FEE TRANSMITTAL For FY 2007			Filing Date		June 1, 2007					
			First Named Inv		Tsutomu Nagaoka					
						Yang, Nelson C.				
Applicant claims small entity status. See 37 CFR 1.27				Art Unit		1641				
TOTAL AMOUNT OF PAYMENT (\$) 8,10.00				Attorney Docket No. 65512 RCE (70801)						
METHOD OF PAYMENT (check all that apply)										
Check Credit Card Money Order Other (please identify):										
x Deposit Account Deposit Account Number: 04-1105 Deposit Account Name: Edwards Angell Palmer & Dodge LLP										
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)										
x Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee										
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17										
FEE CALCULATION										
1. BASIC FILIN	G, SEARCH, AN			ES						
	•		FEES	SE	ARCH FEES	EXAMII	NATION FEES			
Application T	ype Fe	e (\$)	Fee (\$)	Fee (\$	Small Entity) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees F	Paid (\$)	
Utility	3	300	150	500	250	200	100			
Design	2	200	100	100	50	130	65		,	
Plant	2	200	100	300	150	160	80	-		
Reissue	3	00	150	500	250	600	300			
Provisional	2	200	100	0	0	0	0		•	
2. EXCESS CLAIM FEES Small Entity										
Fee DescriptionFee (\$)Fee (\$)Each claim over 20 (including Reissues)5025										
	ent claim over 3 (g Reissues)					200	100	
Multiple depend	dent claims	•						360	180	
Total Claims	Extra Claim	ıs Fe	ee (\$)	Fee F	Paid (\$)	M	ultiple Depende	ent Claims		
	- 21 = 0	_ ×	= _			F	ee (\$)	Fee Paid (\$	3)	
HP = highest num	ber of total claims pa								_	
Indep. Claims	Extra Claim		<u>ee (\$)</u>	Fee F	Paid (\$)					
HD = highest surplus of independent plains and for if you had the in-										
3. APPLICATIO	HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheets										
- 100 = /50 (round up to a whole number) x =										
4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge): 1801 Request for continued examination (RCE) (see 37 810.00										
SUBMITTED BY										
Signature	Burns	6.74	where		Registration No. (Attorney/Agent)	27,840	Telephone	(617) 51	7-5508	
Name (Print/Type)	David A. Tuck						Date S	September	r 8, 2010	